REQUEST FOR PROPOSAL 2 QUARTER 4 DISTRIBUTION OF NALOXONE KITS AT LOCAL HEALTH DEPARTMENTS REPORT

Indiana State Department of Health
Division of Trauma and Injury Prevention



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Background

Indiana ranks 16th in opioid-related deaths in the United States, as of 2016. This high ranking in opioid-related deaths is, in part, a result of the rise in opioid-based prescription drug overdoses in Indiana and across the nation. The most common drugs involved in prescription drug overdose deaths include hydrocodone (e.g., Vicodin), oxycodone (e.g., OxyContin), oxymorphone (e.g., Opana), and methadone (especially when prescribed for pain). Naloxone is a safe, non-addictive medication that inhibits the effects of a prescription drug overdose and allows regular breathing to resume.

A Memorandum of Understanding (MOU) was created between the Indiana Criminal Justice Institute (ICJI) and the Indiana State Department of Health (ISDH) for the purpose of delegating funds to increase the training and distribution of naloxone in communities. This MOU was effective between July 1, 2016 and Aug. 31, 2017. The funds provided by ICJI were regulated for use under the following conditions: ISDH would gather and distribute naloxone kits to state and local law enforcement and public health agencies and counties across the state, as well as perform quarterly reporting of who received treatment, the number of naloxone kits distributed, and the number of kits used across the state.

Methods

To meet the MOU requirements, ISDH sent a Request for Proposal (RFP) to local health departments (LHDs) to provide education and distribute naloxone in their respective communities. The RFP describes the ISDH efforts and requirements for expanding the distribution of naloxone kits. The dates for implementing the RFP were set for March 1, 2016, to Dec. 31, 2017. The quarterly reporting schedule is:

- Quarter 1 (Q1) March-March 2016
- Quarter 2 (Q2) April-June 2017
- Quarter 3 (Q3) July-September 2017
- Quarter 4 (Q4) October-December 2017

Twenty--two LHDs across the state applied and were accepted for the naloxone kit distribution program: Decatur, Elkhart, Fayette, Fountain-Warren, Gary, Hamilton, Howard, Jackson, Kosciusko, LaPorte, Lawrence, Marion, Marshall, Martin, Orange, Porter, Pulaski, Scott, Tippecanoe, Union, Vanderburgh and Whitley. The location and distribution of the counties are depicted as the highlighted counties in **Figure 1**. Each LHD was given a different number of kits based on the number of kits requested by the health department. Priority was given to high-burden counties depicted in **Figure 2**. The ISDH provided a total of 2,106 kits for the 22 participating LHDs (**Figure 3**).

Figure 1: Map of local health departments selected for naloxone kit distribution in RFP 2

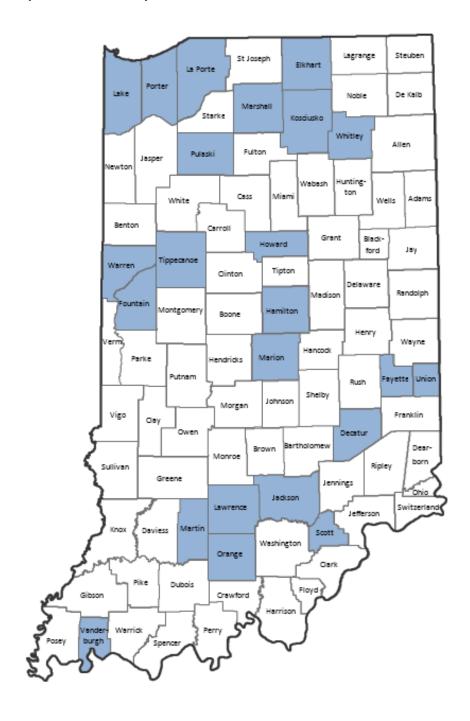


Figure 1 shows a map of counties with local health departments participating in the naloxone kit distribution program. These counties are highlighted in blue.

Figure 2: Map of prescription drug overdose priority counties through Indiana's Prescription Drug Overdose Prevention for States Program



Figure 2 shows a map of counties that are considered priority for preventing prescription drug overdose through Indiana's Prescription Drug Overdose Prevention for States program. These counties are highlighted in red. The Prevention for States program is a part of the Centers for Disease Control and Prevention's (CDC's) ongoing efforts to scale up prevention activities as part of a national response to the opioid overdose epidemic. Prevention for States provides resources and support to advance comprehensive state-level interventions for preventing prescription drug misuse, abuse, and overdose.

Figure 3: Total number of naloxone kits given to local health departments by the Indiana State Department of Health

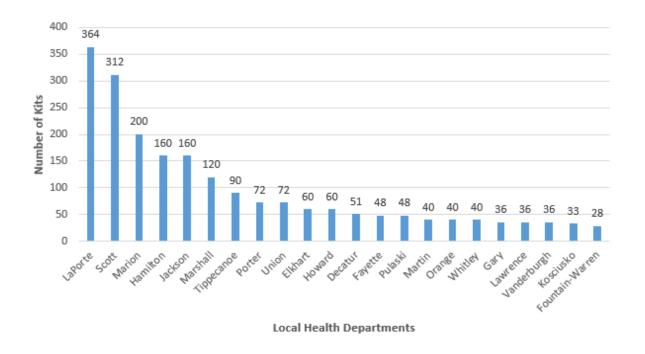


Figure 3 depicts the total number of naloxone kits that were given by the Trauma and Injury Prevention Division at the Indiana State Department of Health to the 22 LHDs. The LaPorte County Public Health Department received the most kits, 364, while the Fountain-Warren County Health Department received the smallest number, 28.

Results:

All 22 LHDs reported a total of 568 kits distributed for quarter 4. A general trend from the reporting counties was that there was an emphasis on training, distributing, and replenishing kits to first responders. Scott and Hamilton counties were able to distribute the most kits, with a combined total of 237 kits distributed in the fourth quarter. **Figure 4** illustrates the number of kits distributed during quarter 4 by each participating health department.



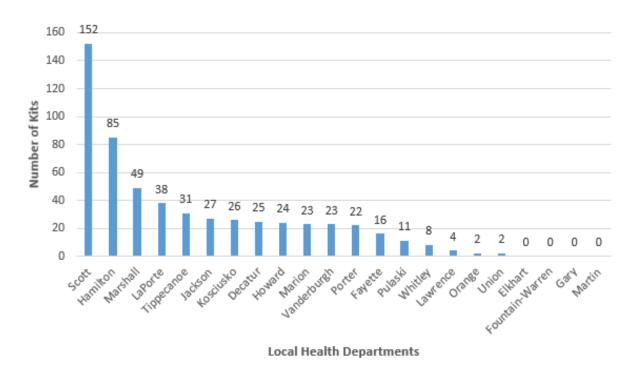


Figure 4 shows the number of kits distributed by LHDs to their communities during quarter 4. The most kits distributed were from Scott County with 152 kits. The least number of kits distributed were from Elkhart, Fountain-Warren, Gary, and Martin at 0.

Table 1: Services co-offered, partner agencies involved in training and naloxone training outreach

Local Health Department	Services Co-offered	Partner Agencies Involved With Training and Distribution of Naloxone Kits	Naloxone Training Outreach Methods
Decatur	None	N/R	No public outreach because kits were given to first responders
Elkhart	•Gweedos Purple Shamrocks provides training, assistance with distribution, verbal resource information, and resource lists for treatment services	Gweedo's Purple Shamrocks Nappanee Police Department Bristol Police Department Concord High School Police Department Elkhart Community Schools Northwood Community Schools	Word-of-mouth Gweedos Purple Shamrocks Information regarding OPTIN
Fayette	Syringe exchange services Sterile injection supplies Education for safer injection Wound care Proper syringe disposal Nutrition Hepatitis and HIV testing Treatment information Prevention Education Hepatitis A & B, Tdap, and HIV immunizations HIP 2.0 presumptive eligibility Personal hygiene products Referrals to treament	Local Health Department is the sole distributior	Facebook Word-of-mouth Flyers Newspaper articles
Fountain-Warren	•Resource list	•Assitant County Health Nurse/Health Educator	•Word-of-mouth
Gary	•Treatment services •Educational services •Support services	•Edgewater Health	Outreach through treatment clinic
Hamilton	List of HIV and Hepatitis C testing sites Treatment resources	Hamilton County Sheriffs Office Local law enforcement Community groups Local Fire Department Additional service groups in Hamilton County	•Facebook •Social Media •Sheriffs Department website •Community member websites
Howard	Treatment resources via "rescue kit" List of support groups List of mental health resources HIV and Hepatitis C testing referrals	Local Health Department is the sole distribution	Social Media (Facebook, Twitter) Newspapers Flyers hung the community (i.e. health department lobby, transportation office, college bulletin boards, housing office, the Rescue Mission Women's Shelter, Family Service Association (FSA) veterans' home and domestic shelter)
Jackson	List of community resources and agencies HIV and Hepatitis C testing Education	Drug Court personnel	Newpaper Flyers Email Facebook Community Organizations Word-of-mouth Radio
Kosciusko	None	Kosciusko County Volunteer Fire and Emergency Response Departments: Claypool and North Webster Ivy Tech Community College Local law enforcement	Face-to-face communication Email Community meetings Shared information with community partners
LaPorte	Treatment resources List of treatment agencies Counseling referrals Hands Only CPR	Office of Dr. Weldon Cooke Police Department Duneland Health Council	•Flyers •Email •Facebook •Community contacts •Word-of-mouth

Lawrence	 Information on Positive Link (including testing dates) 	N/R	Contacted volunteer Fire Departments via Emergency Management meeting Phone calls (libraries, shelters, etc.)
Marion	•Substance Use Outreach Services (SUOS) Toolkit	N/R	Email Flyers Word-of-mouth
Marshall	Aaron's Law Marshall County Health Department (MCHD) Privacy Policy List of Treatment Facilities in Indiana Narcan and Narcan Administration handouts Training documents	Local Law Enforcement Emergency Medical Services (EMS) Coroner Funeral Homes School Corporations Marshall Starke Development Center Turning Point Housing Hemiger House Residents Lay Persons	•Word-of-mouth •Radio •Newspaper •Facebook
Martin	Emergency first-aid information Opioid overdose symptoms Research survey information cards	*Martin County Sheriff's Department Loogootee Police Department *Shoals Police Department *Indiana Department of Natural Resources (IDNR) Conservation Officers	Word-of-mouth
Orange	Treatment resources Resource list including treatment agencies HIV and Hepatitis C testing refferals Support of family members Follow-up Education Addiction counseling refferals	Orange County Health Department Southern Indiana Community Health Care Southern Hills Counseling Center Referrals from IU Health Emergency Department	Newspaper Flyers Email Facebook Community contacts Word-of-mouth
Porter	Statement of purpose List of substance abuse treatment facilities within Porter County and the state of Indiana Narcan "Quick Start Guide" Information on Hepatitis C and HIV testing availability at the Porter County Health Department A "Naloxone Agreement"	Porter Starke Medication Assisted Therapy (MAT) Services	•Community outreach (Porter Starke MAT Program, Porter County Schools, Ministerial Association of Porter County)
Pulaski	•Resources for treatment facilities	Pulaski County Sheriff's Office Pulaski County Drug-Free Council	Facebook Community contacts Word-of-mouth
Scott	Syringe Services Program (SSP) One Stop Shop Rehabilitation and Medical Services Referrals Care Coordination	Scott County Health Department Scott County EMS Scott County Sheriff's Department Austin Police Department Scottsburg Police Department	Community contacts (Emergency Management Agency (EMA) director, fire departments, law enforcement, and EMS) Word-of-mouth Local newspapers Regional television media markets
Tippecanoe	Treatment resources Resource list of treatment agencies HIV and Hepatitis C testing Wound care Safe sex supplies and education Harm reduction kits Support for family members Follow-up Education Counseling Referrals	The Drug Free Coalition of Tippecanoe County Lafayette Trasitional Housing Trinity Ministry Home for Hope Sycamore Springs	
Union	Treatment through Opiate Treatment Center Website with treatment center information Local Heath Department treatment options	N/R	Facebook Word-of-mouth Opiate Treatment Center
Vanderburgh	*Treatment resources *Resource list of treatment and support agencies	Deaconess Cross Pointe Stepping Stone	Website Facebook Community contacts Direct phone calls
Whitley	Educational materials Information about Bowen Center and Addictions Recovery Center (ARC)	Local Health Department is the sole distribution	•Newspapers via <i>The Post & Mail</i> • Word-of-mouth

^{*}N/R = Not Reported

Discussion

Reporting varies by county health department. Eighteen of the 22 health departments distributed kits within the fourth quarter. Many of the health departments detailed multiple partners and outreach efforts (**Table 1**). The focus on the recipients of the training ranged from first responders to individuals, including syringe services clients, schools, healthcare personnel, probation officers, shelters, treatment centers for individuals recovering from substance-use disorders, and other community organizations. Areas that provide the naloxone kits in conjunction with syringe services programs seem to have success in distributing kits. In some areas, the syringe service program is one of the top treatment populations. Other areas may focus on distributing kits to first responders.

The original number of kits distributed to LHDs was determined by the need for prescription drug overdose intervention based on the calculated burden in each county. To select high-burden counties, a point system was created that accounts for all drug overdose mortality rates, opioid-related overdose mortality rates, non-fatal opioid-related emergency department visit rates, community need, and other factors. **Figure 2** depicts the counties with the highest need for prescription drug overdose prevention. Of the priority counties, Scott County distributed the most kits during quarter 4 (152 kits).

In addition to the data report, LHDs discussed the grant activity that occurred during the fourth quarter of the grant cycle. Many discussed setting up operations with outreach efforts, co-services offered in addition to training, and partnering agencies. In general, the outreach that took place was through: word-of-mouth, community organizations, social media, flyers, newspapers, etc. Services offered with the training were generally substance addiction resources/referrals or medication-assisted treatment/referrals and HIV and hepatitis C testing (**Table 1**). The most common partnering agencies and educational outreach to agencies and departments included community organizations, local health agencies, emergency medical services (EMS), and police and fire departments (**Table 1**).

Community interest varied among participating LHDs. In some areas, there was a lot of connection and collaboration in the community to reach individuals who need access to naloxone treatment. Some LHDs had support from the first responders in their county and partnered with them to distribute naloxone. In some of the communities, first responders such as EMS and law enforcement provided suggestions on areas to reach out to for naloxone training and education. There were LHDs that worked with existing programs, such as through the syringe services program, to distribute kits. One local health department noted a large increase in the number of kits distributed and reported usage of these kits. There are other areas in which the community had a general disinterest in the naloxone program. Some LHDs have expressed challenges reaching out to high-risk populations. Some reported that their challenges distributing naloxone may be due to stigma and community members being afraid to attend a training session. Fourteen of the 22 reporting counties mentioned challenges or barriers related to naloxone distribution within their communities.

The top methods of hearing about the training were through a "Community Organization," "family/friend," and "other." Many of the LHDs mentioned communicating directly with community organizations and individuals. The top populations attending the naloxone trainings and receiving kits were "lay person," "other," "syringe services program clients," and "EMS." "Treatment population" referred to the target group that the individual doing the training and receiving the kits intended to treat with the naloxone. The highest categories for "treatment population" were "patient," "client," and "resident."

Overall, LHDs are still setting up outreach and others are working on gaining interest for the program in their local communities.